

# **2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P02000135081

Entity Name: PINECREST PHARMACY, INC.

**FILED**  
**Jul 26, 2006**  
**Secretary of State**

**Current Principal Place of Business:**

8241 SW 124TH STREET  
PINECREST, FL 33156

**New Principal Place of Business:**

**Current Mailing Address:**

8241 SW 124TH STREET  
PINECREST, FL 33156

**New Mailing Address:**

FEI Number: 35-2191796

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GAZQUEZ, JESUS  
8241 SW 124TH STREET  
PINECREST, FL 33156 US

**Name and Address of New Registered Agent:**

DIAZ, LITSY  
8241 SW 124TH STREET  
PINECREST, FL 33156 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: LITSY DIAZ

07/26/2006

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PDS ( ) Delete  
Name: GAZQUEZ, JESUS  
Address: 8241 SW 124TH STREET  
City-St-Zip: PINECREST, FL 33156

Title: VPTR (X) Delete  
Name: FINK, GLORIA  
Address: 8241 SW 124TH STREET  
City-St-Zip: PINECREST, FL 33156

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PDS (X) Change ( ) Addition  
Name: DIAZ, LITSY  
Address: 8241 SW 124TH STREET  
City-St-Zip: PINECREST, FL 33156

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LITSY DIAZ

PD

07/26/2006

Electronic Signature of Signing Officer or Director

Date